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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/709,030			ing Date 08/2000	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN	
FÖR NUMBE			NUMBER FI	LED 1	D NUMBER EXTRA			FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),	E or (q))	N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		22 mir	nus 20 =		1	X \$9 =	18	OR	x \$ =		
	EPENDENT CLAIN CFR 1.16(h))	IS	4 minus 3 = * 1			1	X \$40 =	40		x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$	ets of pap 250 (\$125 litional 50	ation and drawings exceed 100 er, the application size fee due for small entity) for each sheets or fraction thereof. See (a)(1)(G) and 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()))									ı			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	58	J	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	10/30/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 15	Minus	·· 22	= 0	]	X \$25 =	0	OR	x \$ =		
	Independent (37 CFR 1,16(h))	• 3	Minus	···4	= 0	]	X \$105 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
		CLAIMS REMAINING AFTER AMENDMEN	-	HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16(i))	*	Minus	**	=	]	x s =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	***	=	ı	x \$ =		OR	x \$ =		
恒	Application Size Fee (37 CFR 1.16(s))					l	$\vdash$					
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	"If the entry in column 1 is less than the entry in column 2, write "O" in column 3. Legal Instrument Examiner:  If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20"-  "If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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